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MN014501. USS WASP Readies for the Unexpected  
MN014502. Lemoore Hosts Veterans Day Memorabilia Exhibit  
MN014503. Bethesda Dedicates Wall to TRICARE Heroes  
MN014504. Recruits Protected From Diseases  
MN014505. Mr. Mills Goes To Washington  
MN014506. Lemoore Partners With School  
MN014507. Speakers Shine at Pensacola Health Symposium  
MN014508. Smoking Costs DoD Plenty  
MN014509. This Month in Navy Medicine  
MN014510. Do You Know A TRICARE Hero?  
MN014511. Healthwatch: Body Art: Did You Tattoo?

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MN014501. USS WASP Readies for the Unexpected  
By JO1(SW) Crystal M. Raner, USS WASP (LHD 1)

On Board USS WASP - As a wave of helicopters made its approach to the flight deck of USS WASP (LHD 1), the ship's crew prepares for a long night. The flow of simulated casualties seemed endless, with mock injuries ranging from appendicitis to sucking chest wounds. Carrying the flood of casualties from the landing zone by stretcher, hospital corpsmen rushed to triage their patients to determine the condition, severity and extent of each wound.

This was the scenario as USS WASP's medical department and a force of 70 augmentees from National Naval Medical Center Bethesda, Md., joined forces to simulate a mass casualty situation during which WASP was designated a receiving and treatment ship.

"This was an opportunity for WASP's augmented medical team to implement their medical expertise to skillfully handle 40 casualties at a time from all parts of the ship," said LCDR Michael McClincy, MC, WASP's senior medical officer. "The drill is a culmination of five days of training aboard WASP that was overseen by the Surface Warfare Medical Institute."

LCDR Tim Quiner, MC, of SWMI in San Diego, choreographed the mass casualty drill.

"A receiving and treatment ship has the capability of handling 300 casualties before it needs to resupply," said Quiner. "As a second echelon medical facility, WASP's responsibility is to receive casualties, provide immediate medical care and stabilize them in preparation for evacuation to a hospital ship or fleet hospital."

For the drill, many crewmembers became wounded Sailors, who were suffering from all types of injuries, such as an amputated hand, multiple gunshot wound and third degree burns.

From the Flight Deck Triage area, the wounded are loaded up in the medical elevator and sent to the medical department. Doctors reevaluate the severity of their injuries and give medical treatment orders to the hospital corpsmen. Some of the injured will receive immediate surgery, but many will continue to be monitored around the clock from a bed on the medical ward.

"The Sept. 11 terrorist attacks are a prime example why we have to be ready at all times," said ENFR Daniel Rivas. "WASP could be the next ship deployed to support U.S. military troops fighting for the end of terrorism."

WASP has medical facilities capable of providing intensive medical assistance to 600 casualties, whether combat incurred or brought aboard the ship during humanitarian missions. Major medical facilities include four main and two emergency operating rooms, x-ray rooms, a blood bank, laboratories, and patient wards. In addition, three battle-dressing stations are located throughout the ship.

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MN014502. Lemoore Hosts Veterans Day Memorabilia Exhibit  
By LT Don Capoldo, MSC, Naval Hospital Lemoore

Lemoore, Calif. - Naval Hospital Lemoore hosted a military memorabilia exhibit last week to pay tribute to veterans worldwide. Hundreds of visitors stopped by to view memorabilia from World War II, the Korean and Vietnam conflicts and Operation Desert Storm.

The military memorabilia exhibit was the brainchild of Lemoore employee Thomas Kramer, who has a large collection of military memorabilia.

"When I was three or four, I remember my father leaving for World War II," said Kramer. "Then I remember him coming home. Now, I have his uniform and all the newspapers from the war and I wanted to share this with other generations."

Kramer is a Navy veteran. He hopes to donate his memorabilia to a local museum.

A visitor to the exhibit who shared his story was Joshua Derosett, a veteran of World War II and a retired Navy master chief. Derosett looked at the World War II headlines on displayed newspapers and shared his experiences.

"I joined the Navy in 1941 and made chief (petty officer) at age 21," Derosett said. "I made chief so quickly by filling dead men's shoes. A few years later I had a ringside seat for the bombing of Nagasaki. I was air-sea rescue. I remember the pilot of the plane telling me to look out at 3 o'clock. Then the bomb dropped."

Another visitor to the exhibit, John Herrod, a retired Navy senior chief, got some welcome assistance with his memorabilia.

"I had what I figured was a sick call book out of a bunker in Kuwait during Desert Storm," said Herrod. "I showed it to my co-worker, Chuck Moss, and he contacted NAMTRAU (Naval Air Maintenance Training Unit) to see if we could get this translated."

Moss knew that Kuwaiti Air Force Warrant Officer Abdulaziz Boloushi, was assigned to NAMTRAU. When Boloushi heard about the book, he came to the hospital to help translate it.

"It was perfect for Veterans Day," said CAPT Clint Butler, MC, Lemoore's executive officer. "It is important for our young Sailors to understand that they are a part of a greater history. Men like Tom Kramer's father and my grandfather, who served in World War II, and men and women who serve today, have something in common."

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MN014503. Bethesda Dedicates Wall to TRICARE Heroes  
By JO2 Ellen Maurer, National Naval Medical Center Bethesda

Bethesda, Md. - National Naval Medical Center Bethesda has a unique way of recognizing the heroes who do their everyday tasks in an extraordinary way. It has dedicated an entire wall to staff who go out of their way to serve patients and their families.

The "Celebrate Our Customer Service Heroes" gallery recognizes the

hundreds of hospital staff members who go above and beyond their everyday jobs to help patients. According to Bethesda's Customer Service Coordinator Charlotte Cope, the gallery builds morale and reminds patients that "Caring is What We Do Best."

"We want people to know that what they do does count," said Cope. "Recognizing each person's efforts builds morale and increases teamwork and productivity."

According to Cope, surveys have shown that Bethesda ranks higher in customer service than any other Department of Defense medical facility.

"I think that says this hospital really values our patient's opinions about the care they receive here," she said.

The gallery was started in 1999. It displays nine customer service heroes each quarter. Cope said heroes are nominated by patients who take the time to write a letter describing a particular clinic or person who gave them exceptional care and service.

"We get a lot of those kinds of letters here," said Cope. "Every quarter, a customer service heroes selection team reviews about 350 patient letters, looking for ones that demonstrate quality service delivery, responsiveness, innovation, telephone courtesy, environmental enhancement, and partnering."

Cope adds that patients are primarily the ones who nominate people for the heroes' gallery, but people who don't work in clinics are also eligible.

"Anyone can be nominated, whether they are military or civilian and regardless of the location they work, as long as a person does not nominate someone in his or her own chain of command," says Cope. "In fact, right now we're really working to increase the recognition of those who work in administration or are support personnel because, although they're usually not directly involved with patients, they do play a big role in our customer service at the hospital."

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#### MN014504. Recruits Protected From Diseases

By JO3 Jackey Bratt, Naval Hospital Jacksonville

Great Lakes, Ill. - While discomforts abound at Navy boot camp, the Navy's newest Sailors should take comfort in knowing by the time they join the Fleet, they are protected against many potentially life threatening diseases.

Chicken pox, hepatitis A, yellow fever, measles, mumps, rubella polio, and tetanus are just a few of the inoculations recruits receive during their first weeks in the Navy. During the "summer surge" of new recruits, Great Lakes gets assistance in administering inoculations and medical screening from Navy treatment facilities from throughout the U.S.

LTJG Noelle Peterson, NC, of Naval Hospital Jacksonville, Fla., helped out at Great Lakes recently when the regular summer surge of new recruits became a fall surge as America's young people respond to the Sept. 11 attacks. Reservists were also re-called. Alongside other medical personnel, Peterson screened recruits and reservists.

Peterson screened for pregnancy, sickle cell, glucose 6 phosphate dehydrogenase deficiency (G6-PD), and illegal drugs. Eyesight, hearing, and dental needs are also checked. Although all recruits are given an initial screening at a Military Entrance Processing Station (MEPS), they are required to have additional medical tests at boot camp and get protective inoculations.

"Dealing with massive numbers of recruits equals mass disruption," Peterson said. "They didn't realize that if they filled out the health risk survey sheet and had no problems, they were getting shots."

Peterson was busy poking and prodding recruits when she learned of the hijackings on Sept. 11.

"Many recruits wanted to know what was going on in the outside world since they didn't have access to newspapers or television," she said. "I felt obligated to let them know the status of our nation. After all, they volunteered to protect and defend."

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#### MN014505. Mr. Mills Goes To Washington

By JO1 Sonya Ansarov, Naval Medical Center San Diego

San Diego - As a youngster, HM2 Johnny Mills dreamed of working on Capitol Hill. Now, thanks to the Navy, his dream is coming true.

Mills, an x-Ray technician in the Naval Medical Center San Diego's radiology department, is going to Capitol Hill as the radiology technician for the Office of the Attending Physician for the U.S. Congress.

"I've been in the Navy for 16 years. I'd never been to Washington D.C. before I had to go there to interview for this position," Mills said. "Just being in the Capitol building itself was overwhelming. I never envisioned myself having the opportunity to serve my country in this way. Not too many people can say they've done this."

Mills did not know this position existed until he got a call from Washington asking him if he was interested in coming there to be interviewed for the job.

"I was anonymously nominated for this job," he said. "I have no idea who would even think to put me in for this job, but someone remembered something good that I've done."

Mills' Navy career began in 1985. He served at Middle East Force during the war between Iran and Iraq, the old Balboa Naval Hospital, USS PROTEUS, a submarine tender in Guam, Marine Corps Air Station El Toro, Calif., and then NMC San Diego.

Before reporting to his job on Capitol Hill, Mills will attend emergency medical technician school at National Naval Medical Center Bethesda, Md.

Mills is excited about his new job.

"I will be providing care to everyone on the (Capitol) Hill, which could include the Vice President on down," he said. "I see this as the highlight of my naval career."

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#### MN014506. Lemoore Partners With School

By HM3(FMF) Ryan Dilks, Naval Hospital Lemoore

Lemoore, Calif. - Naval Hospital Lemoore and Meadow Lane Elementary School renewed their Personal Excellence Partnership Program agreement recently, re-committing volunteers from the hospital to the school to help children reach their full potential.

"The hospital has been generous with their time and actions working with our students," said Cathleen Jorgensen, the school's principal. "Our school's scores went up higher than any other school in the county, and I believe that is part of the intense tutoring that our students received from hospital staff in the past. I think this is a wonderful sharing."

The Personal Excellent Partnerships Program is sponsored by the Navy Personnel Command, assists America's youth, from pre-school through high school, to become better educated, healthier and more responsible citizens. Navy people - including military, civilians and family members - volunteer their time to tutor, encourage and mentor young people in reading, writing, math, science, citizenship and a myriad of other skills. More than 20,000 Navy volunteers work with nearly 200,000 young people.

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MN014507. Speakers Shine at Pensacola Health Symposium  
By Rod Duren, Naval Hospital Pensacola

Pensacola, Fla. - Naval Hospital Pensacola hosted its fifth annual Health Excellence and Fitness Symposium last week, drawing hundreds of attendees from as far away as Hawaii and Maine.

Co-sponsoring the event with NH Pensacola were other local hospitals, American Lung Association, Naval Aviation Schools Command, University of West Florida, and Pensacola Junior College.

One of the highlights of the symposium was a presentation by CAPT Tom Kersh, MC, head of family practice department at Pensacola. He discussed the hospital's introduction of SMART, Sports Medicine And Reconditioning Therapy, to help officer candidates and enlisted trainees reduce their sick calls, treatment, and attrition due to sports-type injuries.

A speaker who drew one of the largest audiences was retired CDR Ralph Gaither, a seven year Vietnam prisoner-of-war. Gaither spoke of his experiences and the role faith in his physical and emotional survival.

"I learned many things as a prisoner of war," he said. "The most significant thing I learned is that there is indeed a God who listens and cares. We must live each day with an appreciation for the many blessings we have been so fruitfully given."

Next year's symposium planning is already underway. It will again be held at the Naval Air Station Pensacola's Mustin Beach Officers' Club, from Oct. 22 to 24, 2002.

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MN014508. Smoking Costs DoD Plenty

By Army Sgt. 1st Class Kathleen T. Rhem, American Forces Press Service

Washington, DC - DoD officials can't be sure exactly how much smoking costs the department each year, but they know it's a bundle.

A 1998 DoD study estimated smoking costs the department \$584 million per year in medical care and \$346 million in lost productivity, Air Force Lt. Col. Wayne Talcott said.

Talcott is a psychologist assigned to the Air Force Medical Operations Agency in San Antonio, Texas. He is also a former head of DoD's Tobacco Use Reduction Committee.

His numbers are only estimates, he said, because it's impossible to quantify which illnesses are smoking-related and which are naturally occurring.

Lynn Pahland, director of Health Promotion and Preventive Services Policy with the Office of the Assistant Secretary of Defense for Health Affairs, believes the estimates are conservative.

There needs to be a cultural shift against smoking throughout DoD. Officials shouldn't rely on the medical community to wipe out smoking single-handedly, she said.

"We are trying to instill a culture change where we point out and endorse that we want a healthy culture," she said. "We want to put a system in place throughout the Department of Defense - not just in the healthcare system - that healthy lifestyle choices are what we want from everyone."

"Smoking is the single most preventable cause of death in the United States," Talcott said.

Part of this department-wide push is making tobacco products less accessible at commissaries and exchanges. Talcott said cigarettes used to be much less expensive at these stores than off base. DoD has since succeeded in having the prices of tobacco products raised at commissaries and exchanges to make smoking less attractive.

But Congress has said tobacco is a legal product, so the commissaries and exchanges won't stop selling these items any time soon, Pahland added. At the same time, though, store managers are dedicating less shelf space to tobacco and giving more prominent display to smoking cessation aids, such as nicotine patches and gum, she said.

Smoking cessation aids are also available through many military health clinics and hospitals, but not all. Pahland said smoking cessation aid isn't a TRICARE benefit per se, but many hospitals and clinics offer cessation classes and products to improve beneficiaries' health and cut down on healthcare costs.

Doctors in military medical treatment facilities can also prescribe medications to help patients quit, Talcott noted.

A combination of medication and behavior modification therapy is the best approach to kicking the habit, he said.

"The bottom line is we want our armed forces to be as healthy as possible," Pahland said. "It is a scientific fact that tobacco use interferes with health and readiness from both a short-term and long-term perspective. We want to give people the tools to help them make healthy choices."

She noted DoD is concerned about the health of the entire military family, not just service members. "If family members are healthier, that's going to give peace of mind to our armed forces," she said.

The Great American Smokeout Day is today, Nov. 15. For more information on quitting tobacco for good, visit the Smokeout Web sites supported by TRICARE at <http://www.tricare.osd.mil/smokeout> and the American Cancer Society at [www2.cancer.org/eprise/main/docroot/SPC/SPC\\_0](http://www2.cancer.org/eprise/main/docroot/SPC/SPC_0).

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#### MN014509. This Month in Navy Medicine

Nov. 11, 1861 - General Order of the Navy provides for the enlistment of surgeon's stewards, hospital stewards and nurses.

Nov. 12, 1944 - The destroyer HIGBEE (DD 806), the first combat ship to be named for a woman of the service, is launched at Bath, Maine. The vessel is named for Lenah H. Sutcliffe Higbee, who served as Superintendent of the Navy Nurse Corps from 1911 to 1922.

Nov. 15, 1956 - Francis C. Hammond High School in Alexandria, Va. is named to honor HN Francis C. Hammond, who was posthumously awarded the Medal of Honor for saving many Marine lives during the Korean War.

Nov. 17, 1865 - Red Rover, the Navy's first hospital ship, is de-commissioned.

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#### MN014510. Do You Know A TRICARE Hero?

Do you know a person, facility, organization, group or contractor that has enhanced TRICARE's success through the use of best practices, initiative or innovation? You can nominate them as a Heroes of TRICARE by completing the form on the TRICARE website at

[www.tricare.osd.mil/newhero/onlineform.htm](http://www.tricare.osd.mil/newhero/onlineform.htm). After responding to all questions, press the "Go Hero!" button to submit your nomination. Or, send the same requested information via e-mail to [media@tma.osd.mil](mailto:media@tma.osd.mil) or fax it to 703 681-3692. For more information, call 703 681-1775.

Heroes of TRICARE appear monthly on TRICARE's website at [www.tricare.osd.mil](http://www.tricare.osd.mil). In addition, selected heroes will be featured on posters for display at meetings, in lead agent offices, at featured military treatment facilities and at TRICARE Management Activity offices.

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MN014511. Healthwatch: Body Art: Did You Tattoo?

By Susan M. Koerner Naval Forces Marianas

Guam - They peek out under shirtsleeves, at the midriff or around the ankle - tattoos are showing up on Ph.D.s and Sailors, teens and grandmothers, Marines and athletes.

Even though they might be becoming more common and mainstream, health providers caution before you leap. Tattoos can have lasting consequences.

"Consider the impact health wise, both long term and how you are going to get it done," said LCDR Chuck Toner, MC, head of the dermatology department at U.S. Naval Hospital Guam.

Those shopping around for a tattoo should insist on sterile equipment and not be afraid to ask questions.

According to a recent study at University of Texas Southwestern Medical Center, people with tattoos are nine times more likely to be infected with hepatitis C, a viral disease that can cause cirrhosis of the liver and even liver cancer. Infected blood and needles spread it.

"There is also a substantial risk of hepatitis B and HIV, which can also be transmitted through unclean needles and instruments," Toner said. "A tattoo goes into the dermis (the underlayer of the skin), which contains blood vessels."

Another risk is the possibility of an allergic reaction to certain colors used in the tattoo. Yellows may contain mercury or cadmium, which is a common allergen.

"Also you can become photo allergic," said Toner. "If you get too much sun, it can itch and cause changes to the tattoo."

Health officials also warn of the dangers of "do-it-yourself" kits, or using sewing needles dipped in India ink.

For those who have tattooed and then had a change of heart, removal is a possibility, depending on several factors.

"The old methods to remove a tattoo were to either cut it out and do a skin graft, or dermabrasion, which is basically like using sandpaper on the skin, both which would leave a nasty scar," said Toner. Within the last six years, tattoo removal methods have improved with the use of laser technology, but it is still a lengthy, expensive and somewhat painful process, he said.

The Navy has laser centers capable of removing tattoos at the Naval Medical Centers in San Diego and Portsmouth, Va., but since there are only two facilities and tattoo removal is considered a cosmetic procedure, those facilities also have long waiting lists, according to Toner.

Tattoo removal by laser consists of six to eight or more treatments spread out over a year or more. If an unskilled amateur did the tattoo, it may not be totally removed since varying layers of skin may have been penetrated.

"There are limits to undo what you have done," Toner said.

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Beginning this week, MEDNEWS will be published on Thursday vice Friday. It will not be published Thanksgiving Week.

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